PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (see an example) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below. Some articles will have been accepted based in part or entirely on reviews undertaken for other BMJ Group journals. These will be reproduced where possible.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Factors associated with depressive state in myasthenia gravis patients: a multicenter cross-sectional stud
AUTHORS	Yasushi Suzuki, Kimiaki Utsugisawa, Shigeaki Suzuki, Yuriko Nagane, Masayuki Masuda, Chiaki Kabasawa, Yuko Shimizu, Hiroya Utsumi, Shinichiro Uchiyama, Kazuo Fujihara and Norihiro Suzuki

VERSION 1 - REVIEW

REVIEWER	Dr. Masakatsu MOTOMURA M.D.
	Assistant Professor
	Department of Clinical Neuroscience and Neurology
	Graduate School of Biomedical Sciences
	Nagasaki University
	1-7-1 Sakamoto, Nagasaki 852-8501, Japan
REVIEW RETURNED	25/08/2011

GENERAL COMMENTS	There are a lot of papers concerning MG treatments. However there are few papers about causal background factors for psychological state in MG patients. We, the neurologists have many MG patients with depressive symptoms. In this points, this paper is very important and useful clinically. I would like you to develop your work
	in the near future.

REVIEWER	Antonio L Teixeira, MD, PhD Associate Professor of Neurology and Psychiatry School of Medicine, UFMG, Brazil
	I report no conflict of interest.
REVIEW RETURNED	24/10/2011

RESULTS & CONCLUSIONS	The results are well presented, but I would suggest adding another table showing the values of demographic and clinical parameters of MG patients with and without depression (defined as BDI > 20).
GENERAL COMMENTS	The study aimed at examining factors associated with depressive state in patients with
	myasthenia gravis (MG). Recruiting patients from 6 different Japanese centers, authors were able to obtain a significant number of MG patients which is a strength of the present study. They found that oral corticosteroids, unchanged clinical status and early disease stage are factors associated with depressive state in MG. In our view, this study adds significant information to the literature. The major limitation of the study is the way depression was assessed (by a self-rating scale, the Beck Depression Inventory), which was appropriately acknowledged by the authors. It would be

important to specify the calcineurin inhibitors used as different
patterns of prescription may exist according to the country. In Brazil,
for instance, prednisone is the most prescribed corticosteroid for
MG, not prednisolone as reported. As this is a cross-sectional study,
assuming causality is really complicated. Therefore consider stating
"associated factors" instead of "causal background factors".

VERSION 1 – AUTHOR RESPONSE

For reviewer #1: Dear Dr. Motomura

Thank you very much for your favorable comments on our manuscript, and I appreciate also your encouragement.

Sincerely yours, Kimiaki Utsugisawa, MD

For reviewer #2:

Dear Dr. Teixeira

Thank you very much for your favorable comments on our manuscript.

Point 1. We agree with you that another table should be given. We added another table as Table 2 for 'Backgrounds of patients with or without depressive state and comparison between the two groups', and added related descriptions (page 10, lines 14-15).

Point 2. We agree with you that there may be some differences of prescription pattern among the countries. We added descriptions (page 13, lines 6-2 from bottom) according to your suggestion.

Point 3. According to your suggestion, we rewrote 'causal background factor for depressive state' to 'factors associated with depressive state' throughout the text.

Sincerely yours, Kimiaki Utsugisawa, MD